A DISCOURSE

COMMEMORATIVE

10949

OF

NATHANIEL CHAPMAN, M.D.,

LATE PROFESSOR OF THE THEORY AND PRACTICE OF MEDICINE AND OF CLINICAL MEDICINE.

DELIVERED BEFORE THE

TRUSTEES, THE MEDICAL FACULTY, AND STUDENTS

OF THE

UNIVERSITY OF PENNSYLVANIA.

BY

SAMUEL JACKSON, M.D.,
PROFESSOR OF THE INSTITUTES OF MEDICINE.

OCTOBER 13, 1854.

PHILADELPHIA:
T. K. AND P. G. COLLINS, PRINTERS.
1854.

Ar a meeting of the Medical Class of the University of Pennsylvania, held Oct. 16, 1854, Mr. William Cook, of New Jersey, being called to the Chair, and Mr. W. K. Fort, of Alabama, appointed Secretary: On motion, it was resolved that a Committee be appointed to carry out the intention of the meeting, consisting of one from each State, Province, and Country, as follows:—

G. W. L. CARR,	Alabama.	CHARLES HODGE, Jr.,	New Jersey,
O. T. HUNT,	Arkansas.	E. C. CORYELL,	New York.
EBER HESTON,	Delaware.	W. T. MACNAIR,	North Carolina.
S. R. WILLIAMS,	Florida.	THOMAS W. CARRITT,	Nova Scotia.
Jos. Jones,	Georgia.	R. A. O'BRIEN,	Ohio.
ZACCHEUS TEST,	Indiana.	S. Preston Jones,	Pennsylvania.
C. B. TALBUTT,	Kentucky.	J. Brown Gaston,	South Carolina.
W. T. MILLER,	Louisiana.	R. B. BERRY,	Tennessee.
BRADLY TYLER,	Maryland.	WM. D. WOODEND,	Virginia.
JAMES D. HEWETT,	Massachusetts.	R. D. MAZARREDO,	Cuba.
J. NEWTON HELM,	Mississippi.	CHARLES GRÉBÉ,	Germany.
JULIAN BATES,	Missouri.	AUGUSTUS T. STAMM,	Prussia.
A. H. CHANDLER,	New Brunswick.		

CORRESPONDENCE.

University of Pennsylvania, October 20, 1854.

DEAR SIR: The members of the Medical Class listened with great pleasure to your Address Commemorative of the late Dr. Nathaniel Chapman. We, the undersigned, have been appointed a committee, to solicit a copy for publication. The tribute will be gratifying to the numerous friends of Dr. Chapman. The discourse, as a brief exposition of the views of this eminent teacher, will be read with interest by the whole profession. In conveying the wish of the Class, allow us to add our earnest hope, that the proposition may meet your approval.

Respectfully yours,
Jos. Jones,
Charles Hodge, Jr.,
Julian Bates,
Wm. T. Macnair,
James D. Hewett,
Richard A. O'Brien.

To SAMUEL JACKSON, M. D.

Gentlemen: It is with great pleasure I comply with the wish expressed by the Medical Class of the University, and your own request, for the publication of my "Address Commemorative of the late Dr. Chapman."

Very respectfully, Your obedient servant, SAMUEL JACKSON.

To Jos. Jones, Charles Hodge, Jr., and others, Committee.

October 23, 1854.

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OUR duties to the dead do not cease, nor are our obligations to them cancelled, when the grave closes on their mortal remains. A deep, a weighty debt is due by the living to the illustrious dead, by the present to the time past.

All that we possess truly valuable; our civilization, our social and political organizations, our knowledge, the arts, letters, our science, philosophy, and religion, are rich and inestimable inheritances that have passed to us in lineal descent. We have no title to them as of our production; they are not the fruits of our labor: they have not germinated and been developed under our cultivation. They are the accumulated treasures, the creations of the intellectual faculties with which man is endowed by his Creator: laboriously cultivating and exploring the world of thought and nature through successive ages. They descend as heir-looms of humanity, inalienable possessions of our race, from generation to generation. Each receives them in trust, to preserve, to perpetuate, and to complete, and is bound to transmit them with augmented value, from higher opportunities of cultivation, until the perfectness of knowledge and the universality of truth shall dispel ignorance, error, and the false—the sources of misery, vice. and crime.

This vast amount of human knowledge is collected, condensed, and improved by those devoted to its cultivation and teachings. They gradually eliminate from it all that time and experience have proved doubtful in authority, or untrue as fact. They embody, in a compact form, the thoughts, the ideas, the ascertained truths of all preceding time and investigations.

In them are incarnated thought, the established ideas and governing beliefs that constitute the essentialities of human ex-

istence, and control human actions and destinies. Abstract from man his inherited knowledge, and these radical established idealities of his intellect, and what is he but a gross animal, a mere barbarian? Those whose lives are devoted in this manner to those great offices, are the most illustrious of benefactors. They win for man new capabilities; enlarge his intellectual possessions by new discoveries; augment his power over nature, by compelling her to yield up, for his daily uses and enjoyments, the forces by which she works her own wonderful operations. By these scientific conquests, the material advantages of our existence daily expand; while humanizing influences are not less active in various ways, purifying man's moral nature.

Such men are the really great, the nobles of nature, heroes that lead the van of the struggling ranks of intellectual progress, of human amelioration, of the extinguishment of the still existing barbarism of society, and hasten the onward march of civilization.

It cannot be justly said that mankind have underrated the inestimable advantages they have received from these benefactors of the race, or have ungratefully treated them. In unenlightened times they were regarded as possessed with more than mortal endowments. They have been deified after death; temples have been erected for their worship, and religious rites instituted to celebrate their attributes.

In later times, and in our day, every method that love, affection, and grateful remembrances could devise, has been invoked to perpetuate their resemblances and forms, to record their actions, to acknowledge their benefits, to blazon their names, to celebrate their praise, and award to them "the honorable meed of fame."

There is one, whose name within these walls has long been, and will be, "familiar as household words," to whom this justice is to be rendered; to whom this public tribute is due.

The late Professor Nathaniel Chapman was long the ornament, the boast, and the pride of this school. He shed over it, in its brightest days, its brightest lustre. He will ever be ranked amongst its most illustrious teachers, as he was acknowledged the most eminent of the physicians of his time.

Unhappily, Professor Chapman, by premature infirmities, was separated from his professional and professorial duties before his earthly course was run. The setting sun was obscured, and its

lustre dimmed by a darkened horizon. His death did not fall as an unexpected calamity; yet it called forth deep feelings, and awakened the sympathies of his professional associates, and a large circle of personal friends. The Medical Schools, the College of Physicians, the Philosophical, and other Societies of this city, expressed their esteem for his memory, and eulogized the varied endowments of his character.

The professional merits and services of Professor Chapman require a more extended notice and fuller attestation. This duty I might claim as peculiarly belonging to myself, from the relations so long subsisting between us, and the lasting obligations I have been under to him. These I have always felt were most honorable to myself, which I look back on with grateful and pleasing recollections.

He was my early patron, benefactor, and friend. He sought me out in the day of adversity, when friends fall away. I had never crossed his threshold; he had heard of difficulties and troubles that involved me; and, with generous impulse, he called on me unsought, urged me to enter the profession which I had left some years previous, promised me success, and encouraged me by the example of Boerhaave, who commenced, at a late period of life, his professional career.

I felt grateful for the interest shown towards me, but was compelled to decline his advice. At that time it was impossible. I was bound by ties and duties that compelled me to struggle on

with my entanglements, whatever might be the result.

The casualties of time and events at length left me free to act, wrecked in fortune, heavily encumbered, with no other resources than my professional attainments and individual exertions. But with no field of action open to me, how could they be made available in this emergency? I had given two courses of lectures in the College of Pharmacy, an institution I had assisted in establishing. It occurred to me that a course of lectures on Materia Medica, with which I was perfectly familiar, connected with Therapeutics, could be made useful to students and pofitable to myself.

Unknown to them, in no communication with them, how could I compass my object. I felt that the former kindness and interest shown by Professor Chapman justified me in seeking his aid. I called on him, laid before him my scheme, and asked him if he

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felt free to recommend my course to the students. "Yes, and at once," was his reply. "Doctors Dewees, Horner, and myself have just commenced a summer course. Come and join us." I had no knowledge of this arrangement, so opportune for my success. That day week was appointed for my opening lecture.

I returned to my solitary home. I was alone in my native city, without relative or connection, without kith or kin. But a weight was off my heart; my spirits were buoyant; the darkest hour had passed, and light was breaking on a long night of adversity.

The opportunity for instant exertion, the only favor I could have asked or accepted, had been nobly afforded me. My success

must depend wholly on myself.

I wrote my lecture. Though I had left the practice, I had not abandoned medicine as a science. My principles were not those then prevalent in our medical schools. They were drawn from the ancient sources of our art, rich in imperishable practical facts. drawn by profound observers from a study of disease in nature, and not in books. For fifteen years, a portion of my leisure time had been devoted to this study in the Loganian Library, where are to be found every authority of the Greek and Latin medical writers, translations of the principal Arabian, and the most eminent of the Italian, French, and German medical authors, from the revival of letters to the seventeenth century. I had imbibed the doctrines of the school of Montpellier, from the works of Bordeu and Barthez, that had ever proved faithful to the fundamental principles of the Hippocratic writings, and had not deviated from the route, the only true one, enlightened observation and intelligent experience, on which they had placed medicine. I was familiarized with the physiological views of Haller, Hunter, and Bichat—the last then little known in this country. From these sources I had formed my method of viewing the facts of medicine; they governed my principles, and, though old, they had the quality of being novel.

My lecture was delivered, Professor Chapman sitting beside me. The principles announced were in direct conflict with his most cherished medical opinions.

This was not intentional. My mind filled with the subject, no personal considerations had intruded on my thoughts.

After the lecture, some students remarked to me the singularity of my opposing the Doctor's principles in his own lecture-room, in his presence; and this recalled me to the fact. With most persons a mistake like this would have marred my fortune; but Professor Chapman's cordial congratulations and desire for me to continue the course, assured me that he had not misunderstood me, or misconstrued my intentions and feelings.

From imperfect health, in almost daily suffering, with brokendown forces, and unintermitting work on hand, I was compelled to economize strength and time. I could make no visits, and our meetings were merely casual or professional. I had no opportunities, nor were they thought of, to conciliate his favor through personal influence.

Two years subsequently, on entering the lecture-room, I was surprised by the students warmly greeting me on my appointment as Professor Chapman's assistant in the University. He had announced it to the class that morning. It was the first intimation I had received of such an intention. I called on him soon after, at his request. He congratulated me on my appointment, and mentioned that "he had kept his intended application to the trustees to himself, as he would not excite expectations that might not be fulfilled." He continued, "you and myself agree in some opinions. We differ in others. Teach what you believe to be true."

The egotism of this narrative will, I hope, be pardoned. It is grateful to acknowledge generosity so noble; and a trait like this gives a deeper insight into the real character, into the inner man, than the most elaborate eulogy.

Toleration of differences of opinion is a lofty virtue. It is rare to find it even where it should most abound; in the disciples of religion, of science, and of philosophy. Bitter feelings, deep animosities, personal hatreds, violence, and persecution, too often usurp the place of benevolence, forbearance, and philanthropy. Yet these ought to be the productions of those elevated regions of intellectual thought, in the calm of which the passions should be quelled, and the turbulence of contentious thoughts and struggling interests be stilled. "The fruit of the spirit is goodness and truth."

Professor Chapman, from his reading, experience, and the past

history of Medical Science, was decidedly skeptical of the truth and permanency of medical doctrines. They are convenient for a time, and necessary, he thought, as the rallying-points of facts that would be otherwise scattered and disjointed. While he believed the time for truthful conclusions had not arrived, he was not opposed to the investigations of others more sanguine and enthusiastic; or offended by a confidence in theoretical principles differing from his own. He did not acknowledge their conclusions, but remained firm in his own opinions, in which he had full confidence as safe guides in his practice.

In undertaking, at the request of the Medical Faculty, to deliver a eulogium on Professor Chapman, the task would be to me most grateful could I feel confident of my ability to do justice to the subject. I most sincerely regret my incompetence to perform this duty in a style and manner I could regard as worthy of his character, and befitting his merits. Neither time nor my talents permit me to attempt to portray the varied attributes of character that gave life and joyous animation to the social circle; that made him the beloved physician, inspiring confidence in illness, and dispelling the gloom of the sick chamber; that rendered him the most popular and honored of teachers by annual classes of students gathered from all parts of this wide-spread land, and called forth the universal respect and reverence of the whole American Medical Profession.

The point of view I shall select as the most appropriate on this occasion, in which to present to you our late venerated colleague, is in his professional character, and chiefly in his connection with our science as the guide and guardian of its theory and practice in his position as Professor in this school. He held in this University, for more than thirty years, the most important chair in a medical faculty. The duties devolving on its incumbent are deeply responsible. They demand a gifted intellect, high qualities of character, and extensive knowledge, accurate, solid, and practical. In reviewing this phase of his life, it will be necessary, in order that you may fully understand the important services he performed for our science, to exhibit it to you in its theory and practice at the time when he was called to undertake the office of recreating medicine into a practical method, of new moulding the

medical mind of a large mass of the profession, and training them to the responsible duties of practitioners.

NATHANIEL CHAPMAN was a Virginian by birth, a Philadel-phian by adoption.

From the time he made this city his permanent home, engaged earnestly in his multiplied pursuits, he never left it for recreation or relaxation. His visits abroad were professional.

His ancestry was a highly respectable family of Welsh origin. One branch was amongst the earliest colonists that settled Virginia. The family, his immediate progenitors, migrated from Maryland, where the original estate on the banks of the Potomac, opposite Mount Vernon, has continued in possession of the family for a century and a half.

Of his boyhood days little is known. His principal education was obtained at the Classical Academy in Alexandria, established by General Washington. He never received the advantages of a regular collegiate course of study.

With an educational training so imperfect, he must have been for the most part self-educated.

Dr. Chapman commenced his medical studies with Professor Rush, in 1797, and graduated in 1800, in the University. While a student, he became the associate and intimate companion of the literary characters of the day, at the head of whom was Mr. Denny, a highly polished writer, and editor of the *Portfolio*, a periodical, at the time possessing the highest repute. Chapman was a contributor to its pages, which, at that period, was regarded as a mark of distinction.

The year subsequent he visited Great Britain for the completion of his medical education. He remained abroad during four years in pursuit of this object. The first year was spent in London, as a private pupil of the celebrated Abernethy. The Edinburgh Medical School was the attraction that carried him abroad. At that time, the celebrity it had acquired from its Munros, Cullen, Brown, and Gregory, had not been eclipsed by the Paris or German Schools, or rivalled by those of London and Dublin. The medical school of the Scotch metropolis was the cynosure of American physicians during the colonial period, and continued to be so until within the last twenty-five years. Most of the eminent medical men of

this city, New York, and Boston, of the latter part of the last century, were its alumni. I doubt whether, at that time, more was known of the European continental schools than the mere existence of some two or three of repute. All of the medical doctrines, ideas, principles, and practice of this country were derived from the Edinburgh school, or from English writers. Our knowledge of the works, contributions to science, doctrines, theories, and practice of the French, German, and Italian medical schools and profession, with some very limited individual exceptions, does not date beyond twenty-five or thirty years. This circumstance must not be overlooked.

The great accession to medical science derived from those sources, commenced only towards the closing period of Professor Chapman's professional labors. No small portion of the new and important developments, that are changing all our medical views, occurred a short time previous to, and after his retirement from his professorial chair.

While residing in Edinburgh, Dr. Chapman's admirable social talents brought him into intimate relation with some of the distinguished literati and eminent individuals of that day, a class for which that city has been long famed, and which has won for it the title of the Modern Athens. An interesting anecdote, in this connection, is related in a well-written and graphic biographical sketch of Professor Chapman, in the fifth volume of the Medical Examiner, new series.

In 1804, Professor Chapman returned to the United States, and shortly after contracted a very happy matrimonial alliance with one of the most distinguished and influential families of this city and State. At this epoch commenced his professional life, which continued for forty years in an uninterrupted course, brilliant and successful beyond ordinary examples. I do not mean by success what so often it is intended to imply—accumulation of a large fortune. Had that been his object, he could easily have accomplished it. It is within the power of any sordid mind. He was "not covetous of gold;" he had a higher estimate of professional services and relations than to regard them as the means of exacting a high percentage of gain. He never made an extortionate charge. He erred in estimating his services at too low a money remuneration. This proceeded from his social and generous nature. He forgot

the patient in the friend, warmed by the familiar, animating, and lively converse, which so often made the sick-room the most agreeable place of resort. Often, under these influences, he has refused to make a charge, preferring the gratification of a friendly action, and valuing more the affectionate regards of those he esteemed, than any pecuniary compensation.

> "Thanks, to men Of noble minds, is honorable meed."

The success of Dr. Chapman was an exalted reputation and a wide-spread fame; a world of kind and loving friends, whose hearty welcome and joyous expressions testified to the pleasure his presence ever imparted; a deep confidence in his professional skill and knowledge, that brought strangers from a distance to seek his advice and assistance; an unexampled popularity amongst the classes of the school, founded on esteem and reverence for the man, and admiration for his abilities as a teacher and lecturer; and the high appreciation of the Medical Profession throughout our country, for his eminent qualities as a physician.

How few successful capitalists, accumulating millions, can boast

of a wealth like this.

True riches do not consist in hoards of money, or acres of broad land. They are the sum of permanent happiness, not of short-lived joys, that man can concentrate in his transient existence. Power and rank can do no more than gratify ambitious hopes, and large rentals flatter acquisitiveness. Can those gratifications exceed the delights that ever flow from the conscious approbation of the moral sentiments, proceeding from the daily performance of benevolent actions; from a life spent in relieving human suffering, and the honors and praises of loving and grateful hearts, for daily acts of beneficence?

Such were the worldly capital and income of Dr. Chapman.

This was his great success in life.

Professor Chapman, soon after his return, opened his career as a teacher with a course on Obstetrics. At that time, this department in the University was combined with Anatomy and Surgery, as the subject of one chair, held then by Dr. Shippen, with Dr. Wistar as an adjunct. The Midwifery course was given by Dr. Shippen, and consisted of some ten or twelve lectures. They comprised the simplest rudiments of the art, interspersed with ludicrous anecdotes and jokes, not always remarkable for refinement or propriety, which kept the class in an almost constant roar of laughter.

The real obstetrical instruction of that period was by private teachers. This department was occupied by two very eminent

and popular teachers—Drs. James and Dewees.

The winter succeeding his return, Dr. Chapman commenced a private course on the same branch, which proved successful. In 1808, he became the associate of Dr. James, in conjunction with whom he continued to lecture to considerable classes until 1810.

Dr. James was elected, in June of that year, Professor of Midwifery, which had been separated from Anatomy, and made the subject of a distinct chair, at the request of Dr. Wistar, who had been promoted to the chair of Anatomy and Midwifery on the death of Dr. Shippen in 1808.

The course of Dr. Chapman was, however, not interrupted by this circumstance. He continued, from the popularity he had acquired, to command very respectable classes.

The event did not disturb the connection between Drs. James and Chapman. The professorship was merely nominal. So low was Midwifery, at that period, that attendance on the lectures of Obstetrics was not necessary to a degree.

In April, 1813, the death of Dr. Rush produced a revolution in the medical school of the University. He was succeeded by Professor Barton, who was transferred from the chair of Materia Medica to that of the Theory and Practice of Medicine, and of Institutes.

In the following month, Dr. Chapman was elected to the vacant chair of Materia Medica.

It appeared a bold step in one so young in the profession as Dr. Chapman to follow the veteran teacher Professor Barton in Materia Medica, who had distinguished himself in that branch, to which, in connection with Botany, he had particularly applied his attention. It was a matter of surprise to many that Dr. Barton should have relinquished a position which he had filled with honor and reputation, to accept another for which he was unprepared, and with health too imperfect and vacillating to admit the application and labor it would require.

Dr. Chapman lost nothing by the comparison. He added greatly to his reputation.

It is my impression that the courses delivered by him, during the two years he occupied the chair of Materia Medica, were an advance on those of his predecessor.

The work he subsequently published, The Elements of Therapeutics and Materia Medica, embraces all the material portion of his lectures. That work, I may safely assert, was the best treatise in the English language on those subjects at the time of its publication, and maintained that rank until within a few years. The rapid advances in all the departments of the medical sciences render any medical work obsolete in a few years, unless, by successive editions, it is kept current with the changes and improvements incessantly taking place, from the great activity of scientific investigation now in progress.

The plan of this work, as of his lectures, was at the period of

publication entirely novel.

Materia Medica presents itself in two aspects: In the one, it regards, and is in close relation with pharmaceutical chemistry and botany, zoology, and even mineralogy.

In the other it faces, and is intimately connected with physi-

ology and pathology.

In the first relation, the articles of the Materia Medica are treated as subjects of Botany and Zoology, and in their characters and properties as members of physics and chemistry. Those subjects constitute Materia Medica, the matter of investigation and study of the Apothecary and the Pharmaceutist.

In the opposite aspect, the articles of the Materia Medica are studied in their character of remedial agents. As such, they must be gifted with active qualities, capable of acting on the living structure, of influencing and modifying the vital and functional actions, generally or locally, in a manner to be employed in combating pathological or diseased states of the organism, and remediably in diseases.

This knowledge, the discussions and the determinations of the subjects they involve based on physiology, constitute Therapeutics, "a province of our science," as Dr. Chapman remarks in the preface to his book, "exceedingly interesting, and which has been hitherto strangely neglected." It is in this relation that

Materia Medica incorporates with the Practice of Medicine, and is indispensable to a rational treatment of disease.

Therapeutics in medicine are what strategy is in war. They are the science, the principles, that impart effectiveness to skill, and by a knowledge of which, genius can accomplish those combined and calculated operations on which depend success and

triumph.

Materia Medica was treated by Professor Chapman in his lectures, and in his Elements of Therapeutics and Materia Medica, as merely subsidiary to Therapeutics, indispensable to the physician. Since then, the Materia Medica of Barbier of Amiens—a very elaborate work, in four volumes—and the later admirable treatise of Trousseau and Pidoux on the same subject, have been published, in which this plan has been adopted. Professor Chapman claims it as original, though I am induced to believe it was pursued in the Apparatus Medicanina of Murray—a work now very rare, and which he had not met with.

The opposite system is that which has generally been followed by the English writers, and has been adopted by the late Dr. Pereira, in his Materia Medica, a standard work in that depart-

ment.

Like most human concerns, each method has its advantages and disadvantages, and one or the other will be preferred, according to the particular views and interests entertained and felt by individuals.

In 1816, by the demise of Professor Barton, the chair of the Theory and Practice of Medicine and Clinical Medicine, in the University of Pennsylvania, again became vacant. Dr. Chapman was translated to it from the chair he occupied. He had not yet reached his fortieth year. He had not been in the practice of medicine over thirteen years, and he had attained to the highest position of honor and trust then known in the medical profession.

In undertaking the duties of this chair, difficulties were to be encountered that do not beset it in ordinary circumstances. His abilities as a teacher, his knowledge and acquirements as a sound and practical physician, were now to be severely tested.

In forming a just estimate of any individual, he must be judged by the lights and standard of the times in which he lived and what he then accomplished.

To apply the measure of an after-period, and one of great progress, would be manifestly unjust.

At this most important juncture of his professional life, it is, then, necessary to bring into view what was the state of medical science, and of medical teaching, when he was called on to undertake that duty.

His chair had recently been filled by Dr. Rush, who had acquired the most brilliant medical reputation of this country. Dr. Rush possessed undoubted genius, a fervid imagination, an ardent temperament, and most implicit faith in his opinions. He had imbibed in Edinburgh the doctrine of Brown, then in vogue.

For a century previous, and succeeding to the fall of the Galenical humoralism, numerous medical doctrines had been promulgated, founded on some one class of phenomena existing in the animal economy. Those doctrines were based on chemical, mechanical, physical, spiritual or vital, and nervous considerations and views, according as these phenomena had respectively occupied the attention of their authors. Brown repudiated the whole as worthless. His doctrine was essentially a union of solidism and vitalism.

All living actions, he laid down, proceeded from the solids in consequence of an inherent property he named irritability. This property is called into action by excitants, and the action resulting is life. Hence life was said to be a forced state. Health and disease were depending on the normal or abnormal degree of excitation, and proceeded from different states of excitability. From this it follows that all diseases form but two classes, those of debility, or Asthenic, and those of excess of excitement, or Sthenic diseases. The greater number of diseases, 97 in the 100, are Asthenic, or results of debility. Such are the fundamental dogmas of the Brownonian theory.

Prior to 1793, most of the physicians of this city appear to have been Brownonians, and it is most probable that the doctrine of Brown owed its origin and rapid propagation to a typhus constitution existing throughout Europe, and extending to this country. The same condition seems to have prevailed during the

last ten or fifteen years.

At the above period, a sudden change must have occurred. The yellow fever broke out. At first, it was treated as a putrid fever, or Asthenic affection, and very unsuccessfully. Dr. Rush was the first to detect the difference, and resorted to depletory treatment by bloodletting and evacuants. All other febrile affections exhibited the same change, and this system of treatment became general. That such change in the character of diseases occurred is evident, as many practitioners, most decidedly opposed to Dr. Rush, were compelled to follow him in his system of treatment.

The doctrine of Brown was here completely at fault. The diseases he had classed as Asthenic had assumed a Sthenic character.

Dr. Rush did not, as others, abandon wholly the doctrine; he modified it, and adapted it to meet the exigencies of this change, which in reality moulded it into a new doctrine. He retained Brown's principles of solidism and excitability, but erased debility from the category of disease. Debility, in Rush's theory, was not disease; it was no more than a predisposing cause of disease.

All diseases were sthenic, or of excitement. The essential nature of disease, "morbid excitement, was made to consist" in a convulsive action of the bloodvessels. Thus, there existed but one disease; "disease was a unit." The only difference, however diversified the symptoms, consisted in states of excitability and degrees of excitement. All this apparent theorizing, or reasoning, consists of mere vague phraseology, without a jot of evidence.

The etiology of diseases was made as simple as their pathology. Morbific causes acted only as excitants in an abnormal degree. An enthusiastic disciple, exaggerating the ideas of the master, asserted his belief that the poison of yellow fever might be so diluted that, when bottled and drunk, it would only produce the exhibitation of champagne.

In the doctrine of Brown, the human organism is regarded as a whole; in health and disease, each portion is in a corresponding state. He claims credit for this view. Dr. Rush adhered to this proposition, which vitiated materially his theory.

The incorrectness of this proposition is well established by observation and experiment, as well as by general anatomy and special pathology and special therapeutics.

The names and classes of diseases, Brown asserted, were useless in practice. The only point to be determined was the degree of excitement.

Dr. Rush held the same opinion. Nosology he discarded wholly. In his lectures, he arraigned, tried, and condemned it to execution by the hangman.

The therapeutics and treatment of disease were as simple as the pathology and etiology. Special names and remedies were to be disregarded; a limited number of medicines, chiefly evacuants, with depletion and revulsions, formed the resource of the practitioner.

The simplicity which this doctrine imparted to medicine made it popular with the students. It required no depth of thought, extended reading, or length of time, to master it. Well might its author boast, like Themison, in Rome, that medicine had been

brought down to the capacity of every intellect.

The above sweeping generalities of Dr. Rush, it is obvious, were little adapted to young practitioners entering on practice without experience; yet, they accomplished a good purpose. They broke up the adherence to a blind routine of remedies prescribed from names; they taught independence of thinking, and the habit of examining into the condition of patients.

The first duty devolving on Dr. Chapman, on assuming his

new chair, was to settle the plan of his course.

A large body of our physicians had been educated in the doctrines of Dr. Rush, and they were popular. The old fabric of methodical medicine had been razed to the ground by the assaults of Brown and Rush; while the views and doctrines they had attempted to establish, Dr. Chapman had been compelled to abandon as unreal, from the result of his own experience and researches.

The nosological systems that had been devised to systematize the facts of medicine were so imperfect he could adopt none of

them fully.

Medicine at that time was at a halt. All the facts that could be known by the then available means of research and investigation were exhausted; nothing new could be expected from them, and all the attempts to work them into a persistent theory had proved miserable abortions.

Dr. Chapman had no pretensions to be a reformer; that he could change the character of medicine; or that, by the means at his command, as a practising physician, he could elevate it from its position of a highly cultivated art to a lofty science. At this time, General Anatomy was unknown; Pathological Anatomy had revealed only the grosser alterations of organs; Physiology shed no illuminating ray on Pathology or Practice; Pathology was almost entirely conjectural; Chemistry was incapable of solving the chemical actions of living beings, and the attempts made were deceptions; while the microscope had not poured forth its revelations of minute and elementary structure.

What could be done, under these circumstances, but to collect together the most perfect of the fragments of the wreck of the methodical system, which, in reality, were the embodied experience and tested facts of centuries of practical observation, and to rearrange and reconstruct them into systematic order? By this plan he could, in the most effective manner, accomplish the main object of his chair—the teaching of the best practical methods of treating and curing diseases, and of educating for society sound medical practitioners.

Such were the dictates of common sense, of prudence, judgment, and wisdom. Such were the leading characters of Dr. Chapman's mind. Such was the course he adopted; and such the results he accomplished.

In 1818, 1819, 1820, a remarkable revolution suddenly broke out. From 1806-7 the low forms of fever and diseases of the typhous type had prevailed. Yellow fever had disappeared; bilious fevers, and their congeners, were rare; the evacuant and depletory system of treatment had been nearly abandoned. In 1818, a cycle, similar to that prevailing from 1793 to 1806, recommenced. Yellow fever prevailed at Baltimore, in 1819, and some cases, in scattered localities, presented themselves in this city.

In 1820, it reappeared in Philadelphia, and seemed to threaten to become an epidemic, but was checked, apparently, by the promptness of the measures adopted to arrest it. It prevailed in 1821, in New York, as an epidemic.

The treatment extolled by Dr. Rush and by Dr. James Johnson, bleeding and calomel, and which was relied on generally in the yellow fever of 1793, proved an entire failure. The mortality under that course was over ninety per cent., and it was abandoned.

The City Hospital, for yellow fever patients, was opened by the

Board of Health, and Professor Chapman and Dr. Thomas Hewson were appointed attending physicians.

In this institution, Dr. Chapman employed ol. terebinth., and with more favorable results.

It is to be observed that hospital cases most usually have passed through the first and only paroxysm so characteristic of that special disease, and in the collapse that ensues, excitants will often rally patients in danger merely from prostration. In the first stage of the disease, with high reaction, turpentine was unfavorable in the cases in which I saw it tried.

The same general observation is equally applicable to the bilious and remittent fevers of this cycle, which, neither before nor since, have prevailed to the same extent. They would not bear, as in the former analogous period, the depletory, purging, and calomel treatment.

The diseases of the two cycles were the same, and had the same symptoms, and the same general characters; but they were not identical. The methods of treatment applicable in the one were most disastrous in the other.

This difference I have always attributed to a reigning typhus element, and the intercurrence, in the last cycle, of typhoid fever. The first cases I can recall of that affection were as early as 1818.

In 1822-23, and in subsequent years, the wards of the old Alms Hospital were crowded with cases of that affection.

Dr. Chapman, myself, and others, found the active and perturbating treatment unsuccessful, before then adopted in our fevers, as emetics, active cathartics, and general depletion. A mild and partially expectant treatment, iced drinks, and diluents and diet, had become the received practice of the establishment, with mercurials, used by some in small doses.

Dr. Lawrence, who fell a victim to the disease in 1822, had also fairly made out all the prominent anatomical lesions, from daily dissections, four or five years before M. Louis's celebrated work on that disease had reached this country. The ulceration of Peyer's glands, the enlarged and often ulcerated state of the solitary glands and congestions of the alimentary mucous membrane, were attributed to inflammation, and were looked on as evidences of that pathological condition.

The general medical theory held by Professor Chapman, as

well as the general theory of fever that had been the doctrine of the University for many years, favored this view, and led to this conclusion. All fevers were regarded as sympathetic disturbances excited by local inflammations. Idiopathic fevers were abolished.

Professor Chapman, according with nearly the whole medical profession of that period, was a solidist and vitalist. But he recognized the differences in the vital endowments of the tissues and organs, and the diversities of pathological conditions. The various organs and systems, he taught, were associated in health, and in disease, acted and reacted on each other. The agent of these associated actions he named Sympathy. Of the nature of this "principle of sympathy," he professed to have no knowledge. He says: "It must be confessed, at present, we have no very distinct intelligence relative to its nature." He employs the term to denote, "like chemical affinity, caloric, and many other such expressions, a principle or power of which we know nothing except from the experience of its effects, the precise essence or nature being occult, and concealed." He acknowledged that no accurate idea could be formed as to the mode of its action, or to account for the more intimate consent of parts.

In neither case, he says, could the phenomena be referred exclusively to the nerves, as was commonly supposed. But it must be remembered that the discovery of nerve-centres, and their controlling power over sections, organs, and apparatus of the organism, had not yet appeared above the horizon of medical science, pouring new light into its day-beam, and dissipating the obscurities that enveloped so many vital phenomena like dense mists, impenetrable to vision.

Though, in this theory, "the Principle of Sympathy is made to pervade the body, every portion of which is susceptible of associative actions, that link the several parts into one whole or unity of system; though it is the general medium for the reception and propagation of impressions, yet all portions are not equally susceptible to the action of remedies, or, perhaps, to the causes of disease. Of the organs that hold this relation, the stomach is possessed of infinitely the quickest sensibility to action, and the most intimate and multiplied relations. No viscus or organ, not even the brain itself, can be compared to it in this respect, or which occupies so important a station in the animal economy." He ob-

serves, further: "The stomach is probably the throne of the vital principle from which would seem to emanate an influence that, diffused over the system, preserves the order of the parts, and sustains the vigor, tone, and well-being of the whole animal economy. Languido ventriculo omnia languent. Assailed by impressions it cannot resist, this organ, as the centre of association. becomes the seat of the first link in the chain of most diseases. and is always the chief medium of the operation of our remedies in the correction of morbid derangement."

This sketch of the fundamental medical principles and ideas of Dr. Chapman, incorporated in his theory of sympathy, was indispensable in a just estimate of his medical teaching, and the services he rendered to the profession and to medical practice. The term he adopted has led to great misapprehensions and erroneous opinions respecting his principles and doctrines. In its common acceptation, it has a different and more restricted meaning than he employed it to express.

This theory of sympathy is founded on great and permanent physiological and pathological truths, that have been recognized in successive ages of our science, though designated under different modes of phraseology. It reproduces, modified and condensed, some of the soundest ideas and most positive facts of the great authorities of past times. Any one, with a moderate familiarity with the history of medical doctrines, will recognize, in the sympathetic theory of Dr. Chapman, the animism of Stahl, the solidism of Baglivi, the irritability of Glisson, of Cambridge, as announced in his admirable work, De Ventriculo et Intestinis (not the irritability of Haller, who "curtailed it of its fair proportions"). The doctrine of Sympathy has been the fruitful source of all succeeding medical theories; of the vitalism of Barthez, the great luminary of the Montpellier school; the irritability of Brown and Rush; and the physiological doctrine of Broussais. At the same time, it is seen to embrace the great physiological truth, first enunciated by Van Helmont in a strange jargon, of the independent vitality of the separate organs, yet united in action and subjected to the supreme power of the stomach or epigastric centre.

This important physiological fact, then first promulgated, was mystified by a personification of the vital properties of the organs, converting them into dramatis personæ, enacting life, under the

name of Archæus. The great Archæus was enthroned in the stomach or epigastric centre, the capitol or centralized seat of vital power; while a subordinate Archæus, subjected to its con trol, ruled each separate organ.

Change the term "Archæus" into sympathy, and this phantasmagorial representation of a fact of wide import, presents the theory of Dr. Chapman, in its simple expression of the laws of sympathy. Change it into the term *irritability*, and its correlative irritation, and we have all the essential elements of the more presumptuous doctrine of Broussais. In this manner, no little of what is regarded as new is often no more than olden ideas, facts, and opinions, regenerated in a new phraseology.

Sympathy, or consent of parts, is a perennial fact in medicine. It is found in the Hippocratic writings; it is treated of by Galen, it was the basis of the doctrines of Bordeu and Barthez: its facts are found in almost every work of great practical authority. The medical theory of Professor Chapman, of which it is the radical principle, was the soundest and best theory the times admitted. It was the co-ordination of great truths, long recognized in medicine, free of any rash conjectures or hypotheses, and fully answering the object for which it was intended—to guide the practitioner in the treatment of disease. It had no great éclât, for it was plain matter-of-fact. It made no pretension beyond the demonstration of observation. There was about it no meteor glare that dazzled, but bewilders. Its light was as of the dawn, not bright, but steady, showing the path to be trod clear and certain, and its direction sure.

If the medical theory of Dr. Chapman be compared to that of Boerhaave, Hoffinan, Cullen, Brown, Darwin, or Rush, though it had none of the pretensions or celebrity of those short-lived systems, it possesses from its modest adherence to the available facts of observation and nature, as then established, more of the true character of a theory than can be claimed for any of them. They cannot be regarded, for the most part, as other than brilliant hypotheses, and not in the just acceptation of the term, as theories.

The doctrine of Broussais was an attempt to systematize completely the facts of sympathy, and to adjust the theory of irritability and excitability of Brown and Rush to the facts of general anatomy. Unless this could be accomplished, those doctrines

were annihilated. He failed by attempting too much; "his ambition overleaped itself." He professed to have completed medicine. It is not surprising that Dr. Chapman could discover nothing new in its dogmas, except some rash speculations.

The theory of Broussais in fact differed from that of Dr. Chap-

man only in two important points:-

1st. It undertakes to assign inflammatory irritation as the most general pathological lesion. The surgical ideas of inflammation, from the importance they acquired by the publication of John Hunter's classical work on that subject, had become predominant in medical ideas. Dr. Chapman, with wise reserve, did not attempt to resolve the obscure phenomena comprised in the nature of diseases.

2d. By the absurd exaggeration given to the ascendency of the stomach in determining the pathological states of the organism—sanguine irritation of the stomach, immediately induced or sympathetically communicated, having been made by Broussais an absolute primary condition for the production and existence not only of fever, but of all diseases, and impressions that were felt or produced action in the economy—a plea may readily be proffered to give countenance to this dogma, but it cannot stand a rigid scrutiny.

It is somewhat curious, that the most strenuous opponents in this country, of the Broussaian views, were supporters of the principles of Dr. Rush. Yet indubitably Broussais's theory may be looked on as the adaptation of Rush's system to the requirements and exigencies of general anatomy. It was the completion and perfecting of that system, as far as that was possible.

The doctrine of Broussais was, I have no doubt, suggested to him by the pathological lesions he discovered in the autopsies of typhoid fever patients. That disease had reappeared in Europe after an interval of many years, and the prevalence of it gave that doctrine rapid currency. Fever and structural lesions were regarded as absolute evidences of inflammation. According to the knowledge and the ideas of that day, this inference was legitimate.

The same error was committed at our Almshouse Hospital, when the same lesions were observed, and received a similar interpretation.

At that period, the absolute distinctions now known discriminating fevers and inflammations had not been brought to light. The most logical conclusion from the facts, as they then stood, was that fever was always a result of inflammation.

Dr. Chapman was a most uncompromising vitalist and solidist. He would not admit the slightest concurrence of the fluids in the pathological state, or therapeutic operations. In this respect, he was in agreement with nearly the whole profession of the time. Bichat, a great authority, was not a less strenuous opponent of humoralism. He laid it down as a principle, "that every medicine, even a cataplasm, modifies the vital properties, and that we never act but by and through the sensibility of the organs."

On one occasion, Dr. Chapman engaged Drs. Coates, Lawrence, and Harlan to repeat, at his expense, the experiments of Magendie on the absorption of medicines, to test their accuracy. They were confirmed, but the Doctor did not change his opinion. This was a grave error. A scientific fact fairly demonstrated, should never be rejected because it clashes with our beliefs.

Dr. Chapman constantly improved his lectures by additions of a practical character in pathology and therapeutics. Other novelties he looked on coldly and with distrust. So many theories and systems of great promise, had proved mere fallacies; so much at various times had been vaunted as great advances, yet ended in failures, that he had become incredulous. Besides, therapeutics, or the art of cure, was to him the great end of all medical research. What did not tend decidedly to this result, did not interest him. Hence, he undervalued the physical signs of disease. He saw in them correctly, only diagnostic means; they proved the existence of disease and placed its locality. From his practical perspicacity and tact, he had seldom found the rational or constitutional signs to deceive him. Physical explorations did no more than confirm his previous diagnosis. They were not suggestive of the true and most important subjects of medical inquiry; as, for instance, the causes, nature, and remedial treatment of tubercles.

In the same manner he did not anticipate very important practical results from microscopic or minute anatomy. He often pointed to the example of the material Organic Medicine of the Paris school. It promised to unravel all pathology with the scalpel; it has merely demonstrated pathological anatomy, which it still

confounds with disease itself. It has not approached a solution of the great pathological problem, and has led to no therapeutic advancement.

Dr. Chapman disbelieved that a knowledge of minute structure would yield any better fruit. It could do no more than carry our knowledge of altered structure a step further. This criticism is correct; but, without a knowledge of the primary elementary forms of organized structure, the analysis of the organic or nutritive action, in the alteration of which lies the pathological problem of organic changes, could not be effected. Minute anatomy prepares the ground for this important work.

As a lecturer, Dr. Chapman was self-possessed, deliberate, and emphatic. Whenever warmed with his subject, his animation became oratorical. Often the tedium of dry matter would be enlivened by some stroke of wit, a happy pun, an anecdote, or quotation. He was furnished with stores of facts and cases, drawn from his own large experience and observation, illustrating principles, diseases, or treatment under discussion. His bearing was dignified, manner easy, and gestures graceful. He had a thorough command over the attention of his class, with whom he always possessed an unbounded popularity. His voice had a peculiar intonation, depending on some defect in the conformation of the palate that rendered the articulation of some sounds an effort. The first time he was heard the ear experienced difficulty in distinguishing his words. This was of short duration; for, once accustomed to the tone, his enunciation was remarkable for its distinctness. Students would often take notes of his lectures nearly verbatim.

Nature had cast him in so plastic a mould that he would have been distinguished in any position of life. From the character of his intellectual faculties, and the tendency of their operations, the natural bias of his mind seemed to fit him for the bar or the legislative hall, rather than the plodding occupation of the schools. He possessed every requisite to form an orator of the highest order, had not the defect mentioned been an insuperable obstacle at the bar with ever-changing juries.

From the solid yet brilliant qualities of his mind, united to great quickness and natural rhetorical manners, he would have ranked in political life with Clay, Webster, Calhoun, and other distinguished public men of the Republic.

In society, Dr. Chapman was a most agreeable companion. He was an admirable talker. Wit and joke, "for many a joke had he," and repartee, and anecdote happily told, abounded and sparkled in his conversation. His manners were courteous and gentlemanly, uniting dignity, without repelling, to a social familiarity that never invited liberties. He had his faults and his failings, as what mortal has not; but this I can aver, that—

"E'en his failings leaned to virtue's side."

It has been my object to claim for our late colleague and friend the justice due to him for the services he rendered to our science, and to his professional merits. They are not sufficiently known, and are far greater than what are attributed to him.

He rescued medicine from the sway of hypothetical systems, and restored it to its legitimate rule of common sense, observation, experiment, and nature. This great change was effected in a manner so unobtrusive and gentle, it scarcely attracted attention; and the benefit thus conferred on science has never been properly appreciated. From that time onwards the legitimate science of medicine has pursued, without deviation, its proper course and its true direction. It has not, during the last three centuries, been so long undisturbed by the intrusions of speculative systems.

The important mission imposed on him he carried out successfully. The duties he was charged with he conscientiously fulfilled; the part assigned to him in this world was ably performed; and the dark curtain of the last act has fallen.

His name is inscribed on the pages of the medical history of our country, with those of the distinguished and memorable men whose cultivation and labors have advanced and illustrated our science. It is enrolled in the annals of this University, always foremost in promoting medical instruction; that has from its commencement uniformly maintained an honorable fame and a high position; in which he was pre-eminent in reputation in its most flourishing period and its highest renown. It is embalmed, cherished, and revered in the grateful bosoms of the thousands who loved him as a man, valued him as an instructor, and blessed him as a physician.